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DATE: August 2, 2005

TO: Examiner Michael C. Henry
TC Art Unit: 1623

Fax No.: (571) 273 8300

FROM: Holliday C. Heine, Ph.D.

No. of pages transmitted
(including this page): 9

Our File: UPITT-008XX

Time:

Your Ref: Application No. 10/659,063

Sent by: Rose

Filed Date: September 10, 2003

Confirmation No.: 3827

A confirmation copy of this transmission will not be mailed unless the following is checked: []

MESSAGE

PLEASE DELIVER DIRECTLY TO:
EXAMINER Michael C. Henry, Tel. (571) 272-0652
TC ART UNIT NO: 1623

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FOR ENTRY

Enclosed for filing please find a: Response to Final Office Action including a
Request for 2 months Extension of Time

The Commissioner is hereby authorized to Charge Deposit Account No. 23-0804 for any additional
filing fees associated with this communication or credit any overpayment.

Holliday C. Heine
Attorney for Applicant: Holliday C. Heine, Ph.D.

Registration No. 34,346

HCH/raw 324791-1

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Application No.: 10/659,063
 Filed: September 10, 2003
 TC Art Unit: 1623
 Confirmation No.: 3827

Rev 07/05

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AUG 02 2005

Date: August 2, 2005

Attorney
Docket No.: UPITT-008XX

Via Facsimile
COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, VA 22313-1450

Sir:

In re application of: Mitchell P. Fink et al.

Entitled: EXTRACELLULAR NAD+ AND cADPR AS POTENT ANTI-INFLAMMATORY AGENTS

Transmitted herewith is an amendment in the above-identified application. The following checked items are applicable:

- [] This is a Request for Continued Examination under §1.114; authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$ _____) per §1.17(e).
 [] Enter the unentered amendment previously filed on _____ per §1.116.
- [X] A Petition for Extension of Time for 2month is hereby made under §1.136(a); authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of same (\$225.00) per §1.17.
- [X] In the event a Petition for Extension of Time is required by this paper and not otherwise provided, such Petition is hereby made and authorization is provided herewith to charge Deposit Account No. 23-0804 for the cost of such extension.
- [] Other:

CLAIMS AFTER AMENDMENT:	MINUS PRIOR PAID CLAIMS:	EQUALS PRESENT EXTRA CLAIMS:	RATE:	ADDITIONAL FEE:
Independent	4 - 4	= -0-	x \$200.00 =	-0-
Total	12 - 20	= -0-	x \$ 50.00 =	-0-
[] Multiple Dependent Claims (1st presentation)			+ \$360.00 =	-0-
SUBTOTAL ADDITIONAL FEE				-0-
Small Entity filing, divide by 2. Small Entity status must be asserted.				-0-
TOTAL ADDITIONAL FEE				-0-

- [X] No additional fee. [] The fee has been calculated above; authorization is provided herewith to charge Deposit Account No. 23-0804 (\$ _____) for the cost of same.
- [X] The Commissioner is hereby authorized to charge payment of any additional filing fees under §1.16 associated with this communication or credit any overpayment to Deposit Account No. 23-0804.

I hereby certify that this correspondence is being sent via facsimile to Examiner Michael C. Henry, TC Art Unit 1623, Fax No. (571) 273 8300, on Aug. 2, 2005.

HCH/raw 324788-1

Holliday C. Heine
 Attorney of Record: Holliday C. Heine, Ph.D.
 Registration No.: 34,346